

"The cases which exist in science, and which I have collected, appear to me to show that fatty substitution of the kidney is essentially characterized by the deposit of a variable quantity of fat, either in the parenchyma of the gland, or at its periphery, but always within the capsule or in the hilum of the organ. Then the fat penetrates between the mucous membrane and the pyramids, and leads little by little to the atrophy of the kidney."

After giving the details of an autopsy which came under his own notice, and quoting a case from Baader, and one reported by Rayer, M. Godard says:—

"The two preceding cases afford some information relative to the condition of the patients, in which, after death, fatty substitution of the kidneys was discovered.

"I shall not endeavour, whilst recalling the principal facts which they present, to trace the history of this disease; in order to do this, I am of the opinion that more complete, and more voluminous testimony is necessary. I will insist only on the difference existing between the infiltration of fatty granulations and globules in the epithelium of the kidney—an occurrence which is often met with in albuminous nephritis—and fatty substitution of the same organ, which results from, and coincides very frequently with, the presence of one or many calculi in the ureter, or pelvis of the kidney.

"I think that these two diseases are distinct, and that the one cannot be transformed into the other.

"Whilst the existence of the first is made known by the occurrence of easily recognized conditions (albumen in the urine, ascites, and anasarca), the other supervenes insidiously, and may lead to the more or less complete destruction of one of the kidneys, without exciting suspicion of its presence. The case observed by M. Bricheteau shows that if both kidneys are affected, the secretion gradually diminishes, then stops for a certain number of days, and the patient dies without presenting any of the symptoms which are the ordinary consequences of the sudden suppression of the urinary excretion."

This passage closes M. Godard's memoir—a memoir in which we do not find an original idea, and which belongs to a class unhappily becoming very numerous, especially in France.

The essay is illustrated with one steel plate engraving, representing fat globules, adipose vesicles, and several tissues affected with fatty substitution, which, like the text, is made up of borrowed material—Bowman, Johnson, and Robin, being put under contribution for the purpose. There are also two lithographs, showing the appearance of the kidneys, in the case of which M. Godard had the opportunity of witnessing the autopsy.

W. A. H.

ART. XXV.—*Anatomy of the Arteries of the Human Body, descriptive and surgical, with the Descriptive Anatomy of the Heart.* By JOHN HATCH POWER, M.D., etc. With Illustrations, by B. Wills Richardson, F.R.C.S.I., etc. 12mo., pp. 374: Dublin, Fannin & Co., 1860.

ALTHOUGH specially designed for the use of students, and of practitioners who have not frequent opportunities for dissection, this excellent little volume may be consulted with advantage by any one who has occasion to investigate matters relating to its subject. The descriptions contained in it are extremely clear, concise, and accurate; equal perhaps to those of any of the more imposing treatises on anatomy. They have evidently been prepared by one who not only knew what to say, but how to say it, having both a natural facility and an acquired skill in teaching.

Dr. Power's production is a very much modified edition of a book bearing the same title, by the late Dr. Flood, of Dublin. The latter work, which enjoyed a good share of popularity in its day, is now out of print; it has been partly curtailed and partly amplified, and its arrangement slightly changed, in preparing it for reissue. We are somewhat inclined to regret the omission of the introductory sketch of the physiology and comparative anatomy of the circulatory

system, prefixed to the earlier editions, and to wish that Dr. Power, instead of striking it out, had reproduced it with such corrections and new facts as to make it accord with the science of the day. Nor do we think his transference of the anomalies to a concluding chapter an improvement upon the usual method of describing them in connection with the normal anatomy of each part; this is, however, a matter of individual taste. We are glad to notice that he has been careful to recognize the efforts which Godman, Gibson, Mott, Peace, and other American practitioners have made for the advancement of the anatomy and surgery of the arteries.

The typographical execution of this little work is handsome, and very generally correct. More than sixty wood-cuts, many of them original, have been introduced in preparing this edition; but these seem to our eye to have been drawn better than they were engraved. Those relating to the heart, taken from the work of M. Jamain, are by no means equal to the originals, and many of the others are at the same time small and coarse.

We should be glad to see a good reprint of this monograph placed in the hands of the profession in this country; it would doubtless meet with a cordial reception.

J. H. P.

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XXVI.—*On Gout; its History, its Causes, and its Cure.* By WILLIAM GAIRDNER, M. D. Fourth Edition. 8vo. pp. 430. London, 1860.

THE very high estimate we gave of the treatise of Dr. Gairdner, upon the appearance of the first edition, has been, we are pleased to find, fully sustained by all who have subsequently given a public expression of their opinion of the work. The views of the author in respect to the pathology of gout, furnish, it must be admitted, a far more probable explanation of the phenomena and results of the disease, in different cases, from its onset onwards, throughout its entire course, than any of those previously advanced, and a more consistent rationale of the treatment, whether preventive or curative; whether directed to the eradication of the depraved diathesis upon which the attack of gout essentially depends; to the alleviation of certain urgent symptoms, or to the special management of individual cases, in the particular circumstances under which these usually present themselves to the notice of the practitioner. The treatise is throughout highly instructive; and, on many questions of deep interest, concerning the nature and causation of gout, and its therapeutics, is eminently suggestive. The fact that the demand for it has been such as to have exhausted already three editions, is a significant indication of the esteem in which the treatise is held by the physicians of Great Britain, while its translation, by professional men of eminence, into other European languages, evince its equal appreciation by the physicians of the Continent.

Having already, in our notice of the first and second editions of the treatise, given a tolerably full analysis of the views advanced by its author, and of the leading facts and arguments by which these are sustained, the same task need not be gone over on the present occasion.

To the edition before us the author has added such observations in illustration and enforcement of his teachings, as his subsequent more enlarged experience has suggested.

A chapter has been added, devoted to a consideration of the mode of application of the principal remedies adapted for the cure of gout to individual cases, having regard to the age of the patient, his constitution, and the period of the attack. The remarks which are made in respect to the treatment of the metastatic forms of gout are pertinent and instructive. We have seen quite enough of the disease to convince us that, in many of these cases, the practitioner will produce far more mischief by prompt interference, and a resort to heroic remedies, than were he to remain altogether inactive, or, at furthest, to merely attempt by the simplest and mildest measures, the alleviation of the immediate and more urgent sufferings of the patient. We can fully endorse the remark of